As this school year started, my priorities included helping buy dorm-room necessities before dropping our eldest daughter at college, and speaking with many of you about your concerns and Congress' work on health insurance reform, financial regulatory reform, and the economy ...

<u> Click here or on the images below to read my entire October 2009 District newsletter.</u>

Update from Congresswoman Melissa Bea

Health Insurance Refor

Dear Friend,

As this school year started, my priorities included helping buy dorm-room necessities before dropping our eldest daughter at college, and speaking with many of you about your concerns and Congress' work on health insurance reform, financial regulatory reform, and the economy.

Since June, over 25,000 of you have participated in my regular teletownhalls, Congress at Your Corner visits, and other meetings across the district. We've discussed recently passed legislation such as the Credit Card Holder's Bill of Rights, economic stimulus, and the American Clean Energy and Security (ACES) Act. Thousands more have shared your concerns and stories via letter, e-mail, and phone.



I heard many passionate calls for health insurance reform, and equally passionate concerns about the impact reform could have on families and seniors who already have insurance. I came to Congress to be an independent voice for the 8th District, and I remain committed to a thoughtful, fact-based approach to this deeply personal topic.

During our second round of 2009 leadership summits in Cook, Lake, and McHenry counties, our 8th District state, county, and municipal leaders provided updates on the challenges they're facing given falling revenues and increased demand for services. Local employers shared their economic outlook during my visits to Chambers of Commerce, associations, and individual businesses across the district. And I met with community groups and families at my local office, at local festivals, and at Congress at Your Corner stops at area grocery stores. I'm encouraged by recent increases in activity and revenues for retailers, manufacturers, and auto dealers. However, while the Federal Reserve indicated that the recession has ended, increased unemployment will likely remain into next year. Government and the private sector will be challenged to "do more with less" as we mutually work toward economic recovery.

Congress is expecting to act on both health insurance and financial regulatory reform in the coming months. Inside you'll find information about the health insurance debate in Congress and a link to more information.

As always, it is an honor to represent you. If you have questions or comments, please e-mail me or call my office.

Melissa J. Bean

Congresswoman Melissa Bean

Health Insurance Reform: 8th District Perspective

I appreciate the President's recognition of the need for health insurance reform. I support his goals to ensure quality care, preserve what works for Americans who are satisfied with the coverage they have, expand and protect affordable coverage, and contain unsustainable cost increases for American families, businesses, and government. However, I will only support legislation that addresses criteria critical to measurably achieving such health care outcomes.

Families: The top concerns for families in the 8th District are the affordability and portability of health care coverage. A preexisting medical condition of a family member can put a family in the category of "uninsurable" and limit career options to keep coverage. Families with insurance are seeing their premiums increase while benefits shrink. Underinsurance is a predicament many Americans don't realize they are in until too late. The U.S. has the unenviable distinction of being the only country to see increasing numbers of health-care-related bankruptcies from individuals with and without insurance. A rational system could make coverage affordable so medical charges reflect actual care instead of everyone paying for those without insurance.

Small business: American employers, particularly small businesses, have limited access to affordable coverage. Owners and employees pay roughly 18 percent more than those at large firms for the same benefits. American employers are competitively disadvantaged in the global marketplace, as foreign competitors are not burdened by double-digit increases in costs. The challenges to small businesses in providing benefits are exacerbated by the economic downturn, as they struggle to cover payroll and operations. And, too many employers are dropped by their insurance company after just one employee health care crisis.



Congresswoman Melissa Bean speaks to members of the Lake Zurich Area Chamber of Commerce about pending reforms to health insurance and financial regulations.

Federal spending: At a time when our nation's debt exceeds \$ trillion, the status quo for health care spending doesn't work. He care costs represent the largest and fastest-growing portion of our government's non-military spending. At the current rate of increas government will be spending \$2.2 trillion per year on health care 2018. Health insurance reform is as important to America's fiscal as it is to our physical health.

Commitment to care: The U.S. spends roughly twice as much, percentage of GDP, than other industrialized nations on health cowhile an estimated 45 million people are uncovered. The U.S. he best medical schools, doctors and technology, and yet the World Organization has ranked us 37th in the world for quality health we can do better.

Public option: While news reports have focused heavily on whether to include a public option, my view is that it should not be the litmus test of whether to move forward on reform. Many of you are fearful about "government-run health care" that could jeopardize your existing plan. I will not support legislation that undermines the employer-based plans that so many families currently count on, or allows government or insurance bureaucrats to interfere with doctor recommendations. If a public option is included, it must compete on a level playing field with private-sector plans. Others have expressed concerns about relying solely on the for-profit private sector, feeling that profit motive conflicts with care and has contributed to dropping or denying needed coverage. First, any reform must provide affordable coverage for those without employer-based options. And, not-for-profit alternatives should be available, which could include a public option.

I'll continue to work with my colleagues and leadership in the House toward developing viable health insurance reform legislation.



My Criteria for Health Insurance Reform

Both the Senate and the House of Representatives are working on multiple versions of health insurance reform bills, and the President recently outlined his own priorities to Congress and the nation.

I will be evaluating legislative options against key criteria that reflect your concerns including, but not limited to, the promotion of:

- Coordinated care for measurable quality outcomes.
- Stability of existing plans.
- Expanded options for affordable coverage for small businesses and families.
- Coverage and/or portability for those with preexisting conditions.
- Shared responsibility for the cost of reform, without unduly burdening families and small businesses.
- Patient choice in terms of plan benefits and doctors.
- Course of care determined by doctors, not government or insurance bureaucrats.
- Measurable reduction in cost increases.
- Cost sharing for all covered participants.
- Personal responsibility in prevention and wellness efforts towards a healthier America.

Congresswoman Bean hears from constituents at Schaumburg's Septemberfest about their concerns about pending reforms to health insurance and the financial system.

To keep up with all the latest on health insurance reform, or to hear clips of my tele-townhalls, go to my Web site at www.house.gov/bean/healthcare.